

# COUNTY BOROUGH OF SOUTHAMPTON

# ANNUAL REPORT

ON THE

# SCHOOL HEALTH SERVICE

For the Year 1956

BY

# H. C. MAURICE WILLIAMS, O.B.E.

M.R.C.S., L.R.C.P., D.P.H., F.A.P.H.A.

Principal School Medical Officer and Medical Officer of Health
to the

County Borough and Port of Southampton

Digitized by the Internet Archive in 2018 with funding from Wellcome Library

4.1051

# INDEX

					page
Child Guidance Clinic	****	****	*****	*****	18
Dental Service	**	****	* * * * * *	*****	25
Education Committee:	Members	of	****	****	2
Handicapped Pupils	***	*****	*****	0 40 0 0 0	30
Infectious Diseases		****		***	33
Immunisation against I	Diphtheria	and			
Whooping Cough			****	*****	28
Medical Inspection Ret	urns	*****	*****		37
Municipal Clinics	•••		****	*****	12
Physical Training	***	****	****	*****	32
Poliomyelitis Vaccination			****	****	29
School Meals: Adexoli	n Capsules	s & Mil	lk	00000	36
School Medical Inspect	ion	****	****	*****	7
Speech Therapy	****		*****	*****	16
Staff	***		*****	*****	2
Tuberculosis		***	00000	***	34
Weights and Heights					9

## EDUCATION COMMITTEE

#### **Council Members:**

THE WORSHIPFUL THE MAYOR (Alderman Mrs. K. E. Cawte, J.P.)

Alderman J. Austin, J.P.

Alderman Mrs. M. Cutler, o.B.E., J.P. Alderman R. R. H. Hammond, o.B.E., J.P. Alderman Mrs. V. F. King, B.A., J.P.

Alderman T. Lewis, C.B.E., LL.D., J.P.

(Chairman)

Alderman J. H. J. MATTHEWS, M.A., J.P.

(Vice-Chairman)

Councillor G. J. DAVIES

Councillor L. F. GOATER

Councillor Mrs. H. K. Greatrex

Councillor W. Greenaway, J.P.

Councillor L. J. GULLIFORD Councillor Mrs. L. A. IRONSIDE Councillor S. M. G. MITCHELL

Councillor M. W. F. PETTIT

Councillor Mrs. E. W. Rolfe Councillor W. A. STEARN,

M.SC. (ECON.)

Councillor A. G. STEAVENSON, M.A.

Councillor W. E. TICKLE

G. A. N. Scriven, Esq.

THE VICE-CHANCELLOR,

MISS K. E. SMITH

THE REV. A. IBBETT

Councillor F. F. Wood Councillor S. R. Woolcock

## **Co-opted Members:**

D. R. BARNES, ESQ.

THE REV. CANON H. D. CEASAR, M.A.

THE REV. G. F. SEYMOUR

A. DUNCAN, Esq.

MRS. R. E. EDMUNDS, B.SC.

C. H. JENKINS, ESQ., B.A., MUS. BAC.

Chief Education Officer: F. L. Freeman, C.B.E., M.A.

## SCHOOL CLINIC (JOINT) SUB-COMMITTEE

Members of the Education Committee:

THE WORSHIPFUL THE MAYOR (Alderman Mrs. K. E. Cawte, J.P.)

Alderman Mrs. V. F. King, B.A., J.P.

(Chairman)

Councillor G. J. DAVIES

Councillor W. GREENAWAY, J.P. Councillor Mrs. E. W. Rolfe Mrs. R. E. EDMUNDS, B.SC.

#### Members of the Health Committee:

Alderman E. Sakoschansky, M.R.C.S., L.R.C.P.

Councillor Mrs. G. E. A. BARKER

Councillor L. J. GULLIFORD

Councillor Mrs. M. E. TIDBOLD Councillor Mrs. L. A. IRONSIDE Councillor B. H. WALTON

University of Southampton.

#### **STAFF**

Medical Officer of Health and Principal School Medical Officer:—

H. C. Maurice Williams, O.B.E., M.R.C.S., L.R.C.P., D.P.H., F.A.P.H.A.

Deputy Medical Officer of Health and Deputy Principal School Mecidal Officer:— W. P. CARGILL, B.SC., M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

Senior School Medical Officer:—

C. R. M. Green field, M.B., B.S., M.R.C.S, L.R.C.P., D.P.H.

School Medical Officers :-

CATHERINE M. ATKINS, M.B., Ch.B.

J. W. Doupe, M.R.C.S., L.R.C.P., D.P.H.

E. Greta Humble, M.B., ch.B.

Martha Lebermann, M.D.

H. D. Rossiter, M.B., B.Ch., D.P.H.

PAULINE M. SEYMOUR-COLE, M.B., B.S., M.R.C.S., L.R.C.P., D.C.H.

MARGARET R. SHAIL, M.B., Ch.B., D.OBST., R.C.O.G.

# Principal School Dental Officer:

A. TOPPING, L.D.S., R.C.S.

## School Dental Officers :-

J. L. Moore, L.D.S., R.C.S. (Left 29/2/56. Recommenced 1/10/56.)

J. H. THOMSON, L.D.S., R.C.S.

G. H. SKERRITT, L.D.S. (Commenced 1/9/56, left 7/12/56).

A. C. Sorrell, L.D.S., R.C.S., (Part time)
F. Owen, L.D.S., R.C.S., (Part time)
I. M. T. St. George, L. D.S., R.C.S., (Part time) (Commenced 1/3/56)
W. H. Francks, L.D.S., R.C.S., (Part time) (Left 12/6/56)
Mrs. M. F. Clark, R.D.S., L.D.S., R.C.S. (Part time) (Commenced 17/5/56)
Left 20/9/56) Left 29/9/56)

H. V. CAPSTICK, L.D.S. (Part time) (Commenced 5/6/56)

#### Speech Therapist :-

MISS D. M. WHITTARD

#### Superintendant Health Visitor: -

MISS E. C. MIDDLETON, S.R.N., S.C.M.

#### Senior Clerk :-

H. DICKINSON

To the Chairman and Members of the Education Committee.

Mr. Chairman, Ladies and Gentlemen,

As Principal School Medical Officer to the Southampton Education Authority I have the privilege of submitting my twenty-sixth Annual Report on the work of medical inspection, treatment, and the physical condition of children attending schools within the jurisdiction of your Authority.

This Report is the forty-ninth in the series since the inauguration of what was at that time termed the School Medical Service, and is now designated as the School Health Service.

On the 2nd May we opened a new clinic on the Millbrook Estate. We were privileged to have as the official guest Sir John Charles, K.C.B., M.D., F.R.C.P., Chief Medical Officer to the Ministry of Health, who performed the opening ceremony.

This clinic will serve the new housing estate on the outskirts of the town and its completion is in accordance with the scheme which you agreed upon when you were considering the future expansion of the health services at the conclusion of the war. The accommodation provided at the clinic caters for maternity and child welfare sessions, treatment of minor ailments amongst pre-school and school children and such additional facilities as artifical sunlight. There is also a dental suite which has been provided on the recommendation of the Ministries of Health and Education. Unfortunately, owing to the shortage of dental surgeons, it has not been possible to make use of the dental accommodation, and unless conditions considerably change during the next few years it is unlikely that we shall recruit sufficient qualified dental surgeons to meet our needs.

One of the Assistant Medical Officers, Dr. Pauline Seymour-Cole, carries out the various clinic sessions and deals with the school health service in the adjacent area.

For some years your Committee have been concerned with the lack of facilities for the care and education of educable spastics. On the 10th September, 1956, a small school unit was opened at Aster Road, Swaythling, for the care and education of this group. This unit, for administrative convenience, forms part of the Bassett Green Junior Girls' School. The staff, apart from the teachers, includes the services of a part-time speech therapist and a full-time phyiotherapist to participate in the work of the centre. We have been fortunate in getting the full co-operation of the Southampton Hospital Management Committee to the scheme. Dr. Preston, the Consultant in Charge of Physical Medicine, attends the centre once a week, and the physiotherapist is a member of his staff.

B.C.G. vaccination now plays an important part in the prevention of tuberculosis; every effort has been made to operate this vaccination service to the full. Unfortunately, the Ministry of Health have limited our activities by only permitting children in the 13-14 age group to be included in the scheme. However, we have offered similar facilities to children of the same age group who are attending the private schools in the Borough. A full description of the work carried out is recorded on page 34.

Although last year the incidence of uncleanliness, particularly in regard to the head, was much the same as in the previous year, there has been a great improvement as compared with the state of affairs some few years ago. The assistant nurses employed by the Authority carried out 75,297 examinations at the schools and as a result of this inspection 313 cleansing notices were issued to parents. It is the rule that every child found with a head infestation is excluded from school for twenty-four hours in order to give the parents an opportunity, after being given advice, of having the condition corrected.

In the early part of 1956 the Ministry of Health approved a scheme of vaccination against poliomyelitis. Vaccination sessions were commenced in May and continued until 30th June. As is known, there was a great shortage of vaccine during that particular period and although the response of parents in giving consent was exceptionally good we were only able to vaccinate a small percentage of those who had registered and indicated the desire for vaccination. It is, however, expected that the position will improve as further provision is made for the production of vaccine on a national basis. Detailed statistics will be found on page 29.

Children under 5 years attending the Northlands Day Nursery were medically examined at periodical intervals throughout the year. Those children found to have a defective condition were referred either to private practitioners or to the appropriate clinics.

The number of schools at which remedial exercise classes are held is now 15. The centre at Bitterne Park Secondary Modern School closed in September, but children recommended for exercises now attend the remedial class held at Bitterne Park Junior School.

An increase in the number of school meals served and the quantity of milk supplied to children at school is recorded during 1956. The percentage of children having free meals, however, shows a slight decrease. Detailed statistics are shown on page 36.

The close liaison which has developed between the minor orthopaedic clinic at King's Park Road and the major clinic at the Royal South Hants Hospital continues to be of great value. A surgeon from the Lord Mayor Treloar Orthopaedic Hospital, Alton, conducts

the major clinic but Dr. C. R. M. Greenfield is also present, so that continued observation is maintained.

The work of the Child Guidance Clinic continued as in previous years. During the year a programme of educational guidance in the second year at junior schools was completed. The aims were to discover any intellectually limited children who needed extra help, and to assess how many children were making slow progress which could be alleviated by remedial teaching. Fuller details can be

found on page 18.

The School Dental Service remained at the same level. No suitable applicants have been found to fill the vacant positions, but with the present staff it has been possible to maintain the service as in the previous year. Oatlands House Clinic continues to function, and by re-arranging the dental staff at Sydney House Clinic, it has been possible to re-open this clinic in October. The Principal School Dental Officer's report on page 25 gives a fuller account of this service.

At the end of the year there were only two minor ailments clinics in operation in schools, one at Aldermoor School and the other at St. John's School. These clinics are conducted by Health visitors. Shirley Warren branch clinic, however, closed late in the year as Oatlands House Health Clinic is near and attendances had become very small at the school.

The health visiting staff consisted of 21 health visitors (including the Superintendent Health Visitor) at the close of the year. There were six resignations and six new appointments made during the year. Of the appointments two were made under the

health visitors' training scheme.

The arrangements whereby my duties as Medical Officer of Health are combined with those of Medical Officer to the Education

Committee continued as in previous years.

In conclusion I would like to thank the Chairman and members of the School Clinic (Joint) Sub-Committee for the help and encouragement which I received at all times. To the Education Department, the National Society for the Prevention of Cruelty to Children, the hospitals, head teachers and their staffs, the Medical Officers and staff of my own department my sincerest thanks are also due.

I am,

Mr. Chairman, Ladies and Gentlemen, Your obedient servant,

At. Manie Zullani 8

# SCHOOL MEDICAL INSPECTION

Number of school departments in the Borough :-

Department: Primary ...... 71 See In addition there are five Grammar Schools. Secondary Modern ..... 17

Details of the number of children examined in the routine age groups.

School			rants Girls	G	Age roup Girls	Gı	Age roup Girls	Total
Aldermoor	•••••	56	58	66	63	_		243
Ascupart	*****	20	16	46	23	—		105
Banister	•••••	31	33	_	_			64
Bassett Green	*****	73	75	92	95	_		335
Beechwood			_	75	77	<u> </u>		152
Bevois Town	****	37	24	25	26		_	112
Bitterne C. of E.		44	34	58	57	_	_	193
Bitterne Manor	•••••	14	8	26	18	_	_	66
Bitterne Park		48	39	78	72	85	71	393
Central	• • • • •	32	26	84	60	117		319
Deanery					4.00	72	88	160
Foundry Lane	*****	41	44	100	108		_	293
Freemantle	•••••	6	7	38	30		110	81
Girls' Grammar	*****			-	4	_	110	114
Glenfield	*****	28	39	-		<u> </u>		67
Harefield	*****	38	45		52		_	83
Heathfield	*****	37	28	64	53	_	_	182
Highfield	*****	34	24	22	24	94	107	104 206
Itchen Grammar	*****	_	_	5 13	_	193	107	206
King Edward VI	*****	36	33	13	<del></del> .	193	_	69
Ludlow Road	*****	34	40	131	115	_	_	320
Managi	*****	81	82	28	24			215
Manny Oals	*****	01	04	20	<b>44</b>	170		170
MC111h no ole	*****		_			58	49	107
Maarhill	*****	36	27			36		63
Mount Pleacant	*****	22	17		_		103	142
Netley Court				21	13	29	19	82
Newlands		00	88	29	22			227
Northam		28	26	20	34			108
Portswood		22.	17	32	19	107	137	334
Redbridge	*****	58	45	_				103
Regents Park	*****	26	24	_		147	115	312
St. Annes				_	15		75	90
St. Denys	*****	32	54	36	29	-	_	151
St. Johns	*****	17	15	17	14	-		63
St. Josephs		10	6	13	10	14	6	59
St. Judes	*****	24	27	—		—	_	51
St. Marks	*****	<u> </u>		25	42	-		67
St. Marys		16	25_	_	21	_		62
St. Monica		50	52	33	26	_	—	161
Secondary Technical	*****			_	7.0	86		86
Shirley	*****	67	62	96	78		110	303
Shirley Warren		17	23	56	48	98	112	354
Sholing (Middle Road)	*****	37	49	110	103	22	210	509
Springhill	*****	22	25	24	42	23	26	162
Swaythling	*****	28	31	34	36 51	79	104	312 189
Tanners Brook	*****	39	41	58	51	187		188
Tauntons Western	*****	42	38	3	4	74	<del>8</del> 9	250
Weston Park	*****	10	35	45	44	/-	0)	170
Wimnson	*****	114	111	37	28			290
Woolston		25	25	_		125	128	303
Woolston P C		24	23	18	11	10	15	101
Woolston R. C	*****						10	101
TOTALS	••••	1580	1541	1659	1539	1768	1564	9651
				1				

# **Attendances of Parents**

Attendance of parents during 1956 with comparative figures for previous five years.

A	Number of Children	Number of		Percent	age of I	Parents	present	in
Age GROUP	Inspected	Parents Present	1956	1955	1954	1953	1952	1951
Entrants								
Boys	1481	1354						
Girls	1477	1324						
	2958	2678	90.5	94.1	95.1	95.9	96.0	94.1
2nd Age Group								
Boys	1516	1196						
Girls	1419	1057						
	2935	2253	76.8	82.6	82.5	84.9	76.4	79.5
3rd Age Group								
Boys	1434	366						
Girls	1262	618						
	2696	984	36.5	41.0	42.0	39.5	40.1	41.6
Totals	8589	5915	68.9	77.2	76.7	77.4	73.8	75.5

# WEIGHT AND HEIGHT MEASUREMENTS

The weighing and measuring of children are carried out periodically atall schools. Statistics for previous years are shown below for comparison.

	Bo		GIRL	S
	Weight	Height	Weight	Height
	st. lbs. ozs.	inches	st. lbs. ozs.	inches
5 years				
1956	2 13 11.8	42.6	2 12 0.5	42.0
1955	2 13 11.8 2 13 14.8 3 1 3.1 3 0 7.5 3 1 3.1	42.8	2 12 0.5 2 12 9.7 2 13 5.0 2 13 0.0	42.5
1954	3 1 3.1	43.2	2 13 5.0	42.6
1953	3 0 7.5	42.9	2 13 0.0	42.4
1952	3 1 3.1	42.9	2 13 7.8	42.6
8 years				
1956	4 0 13.7	48.4	3 12 14.4 3 11 15.7	48.3
1955	3 13 13.2	49.2	3 11 15.7	48.5
1954	4 2 15.6	49.9	3 13 15.5	48.5
1953	3 12 6.4	48.4	3 13 8.1	49.1
1952	3 13 13.2	48.8	3 11 3.5	48.1
12 Years				
1056	5 10 3.5	56.1	6 1 2.9	57.5
1956	5 13 7.3	57.4	6 1 7.2	57.9
1954	5 13 7.2	56.9	6 0 13.3	57.3
1953	5 11 4.7	56.8	6 1 11.3	57.9
1952	6 0 12.9	57.7	6 1 9.8	58.2
1000	0 0 12.7		<del></del>	50.2

The following tables give details of defects found requiring treatment or observation.

# **DEFECTIVE VISION AND EYE DISEASE**

Age Group	Number Defective Examined Vision			Other Squint Conditions				Total	
		No.	%	No.	%	No.	%	No.	%
Entrants 2nd Age Group 3rd Age Group Additionals	2958 2935 2696 1106	599 624 525 235	20.2 21.3 19.5 21.3	102 50 14 21	3.5 1.7 0.5 1.9	43 27 18 7	1.5 0.9 0.7 0.6	744 701 557 263	25.2 23.9 20.7 23.8
Totals	9695	1983	20.5	187	1.9	95	1.0	2265	23.4

# NOSE AND THROAT

Age Group	Number Examined	Number of Defects	Percentage
Entrants	2958	950	32.1
2nd Age Group	2935	342	11.7
3rd Age Group	2696	159	5.9
Additionals	1106	128	11.6
Totals	9695	1579	16.3

# EAR DISEASE AND DEFECTIVE HEARING

Age Group Examir		Defective Hearing		Otitis Media		Other Ear Diseases			Total	
		No.	%	No.	%	No.	%	No.	%	
Entrants .	2958	128	4.3	68	2.3	122	4.1	318	10.7	
2nd Age Group	2935	50	1.7	27	0.9	48	1.6	125	4.2	
3rd Age Group	2696	21	0.8	1		18	0.7	40	1.5	
Additionals	1106	29	2.6	15	1.4	24	2.2	68	6.2	
Totals	9695	228	2.4	111	1.1	212	2.2	551	5.7	

# ORTHOPAEDIC AND POSTURAL DEFECTS

Age Group	Number Examined	Pos	ture	Flat I	Foot	Oth Deform		Total	
		No.	%	No.	%	No.	%	No.	%
Entrants	2958	129	4.5	325	11.0	452	15.3	906	30.8
2nd Age Group	2935	156	5.3	302	10.3	270	9.2	728	24.8
3rd Age Group	2696	174	6.4	231	8.6	256	9.5	661	24.5
Additionals	1106	64	5.8	127	11.5	126	11.4	317	28.7
Totals	9695	523	5.4	985	10.2	1104	11.3	2612	26.9

Following up.—The following up of the defects found to require treatment or observation may be divided into two sections, namely the re-examination by medical officers of the cases referred at routine medical inspection, and the subsequent following up by health visitors of the cases for which treatment has not been obtained.

Visits paid to the homes by the Health Visitors:

V 15113	paru i	o the	nomes	by the	nealth	V 1511C	15 .—	
]	Dental	cases	*****	*****	*****	*****	12	
	Vision c		*****	*****			142	
]	Ear, No	se and	Throat	cases	*****		76	
1	Skin cas	ses	*****	*****	*****		99	
(	General	cases	*****		* * * * * *	****	569	

Cleanliness.—The health visitors and assistant nurses have continued to carry out the periodic cleanliness examinations of all the children attending school. As a result of 75,297 examinations, 313 cleansing notices were issued (Section 54(2), Education Act, 1944) necessitating exclusion from school. All related to infestation with head lice. 139 individual children were concerned, some being found infested more than once during the year.

Facilities are provided at the school clinics for the cleansing of children found infested. The following details show the work performed:—

Total ..... 301

Orthopaedic cases

There were, therefore, 368 attendances for cleansing. In addition to those children excluded from school these figures include children found verminous at special examinations at clinics.

#### MUNICIPAL CLINICS

During the year, 60,724 attendances were made by children at the various clinics, and are summarised in the following table:—

Clinic	King's Park Road	Sydney House	Oat- lands House	Sway- thling	Bitter- ne Park	Surrey House		Cardi- gan Road	Branch Clinics	Total
Dental Service	_	819	4324	_			_	7316		12459
Skin Clinic	3023	3578	2766	3955	1811	1475	919	_	1129	18656
General Inspection	423	1378	1352	940	665	623	404		-	5785
Asthma Clinic	366	_	_				_	_	_	366
Rheumatism & Heart Clinic	174	_			_	_			_	174
Artificial Sunlight Clinic	108	448	712	354	267	420	238	_		2547
Ophthalmic Clinic	5600	—		_			<u> </u>	—	<u> </u>	5600
Ear, Nose & Throat Clinic	2059	-		_	_	_	<u> </u>	_	l —	2059
Orthopaedic Clinic	1807	<u> </u>	—			_	_		<u> </u>	1807
Diphtheria Immunisation Clinic	513	572	819	431	351	177	503	_	191	3557
Poliomyelitis Vaccination Clinic		455	234	126	108	67	293			1873
B. C. G. Vaccination Clinic	944		_	_	_	_	_	_		944
Child Guidance Clinic	2157	_	<u> </u>	_	_	_	_	<u> </u>		2157
Special Cases	322	l — :	_	—	<u> </u>	<u> </u>	<u> </u>	<u> </u>		322
Speech Clinic	2293	<u> </u>		_			<u> </u>	_		2293
Boarded-Out Childen	90	11	17		—		_	_	<u> </u>	118
*National Survey of Children	_	_	2	4 —	2	1	2	_	_	7
Totals	20469	7261	10226	5806	3204	2763	2359	7316	1320	60724

<sup>\*</sup> Survey of the health and development of children born between 3rd and 9th March, 1946, instituted by the Ministry of Education (Special Services).

Details of the work in the various clinics are given with a review of the activities of each school clinic:—

## Health Centre, King's Park Road.—

## Skin Clinic

This clinic continues to be well attended. The nursing staff do very good work in arranging daily dressings as well as special treatment which could not be done so satisfactorily at home.

The incidence of scabies continues on a low level.

Ringworm affecting the body has responded well to treatment, and no epidemic has come to light. Ringworm of the scalp has been rare.

A total of 79 cases, 31 boys and 48 girls, of plantar warts were treated at one of the clinics. The youngest child treated was 5 years of age and the oldest 18 years of age. It is interesting to note that the older children appear to be more prone to infection. This is due, no doubt, to increased activities of one sort or another. The incidence shows that 9 of the 31 boys and 11 of of the 48 girls were under 10 years of age. Treatment with carbon dioxide snow again proved satisfactory. This type of treatment also considerably reduces the loss of school hours.

**Inspection Clinic** 

Children who attend this clinic suffer from a large number of conditions, but the majority are cases of debility, minor sepsis, injuries, enuresis, soiling, etc. Parents are often advised on the general care and welfare of their children.

Cases not considered suitable for treatment at the clinic are referred to their own family doctor,

#### Asthma Clinic

Attendances at this clinic have been well maintained, and results have been satisfactory as the following table shows. A few of the children attending for the first time have been referred by private practitioners.

Breathing exercises are carried out where considered advisable. A number of requests for exercises have been received from the Southampton chest clinic and general practitioners.

Cases residing in the county area have again attended this clinic at the request of the Hampshire County Authority, with whom a very satisfactory liaison has been maintained. 9 boys and 1 girl from the county were treated.

			Boys	Girls	Total
Number of cases treated Average age at onset (years)	*****	•••••	82 3 9/12	28 2 10/12	110
Progress— Much improved	•••••		13	9	22
Improved Some improvement	•••••	•••••	29 16	8	36 24
No improvement Too early to report Ceased attendance	*****	*****	6	1 1 2	7 8
Discharged	*****	*****	7	-	7

## Rheumatism and Heart Clinic

The majority of cases attending this clinic are of the congenital or functional type of cardio-vascular lesions. Rheumatic cases have been few, and of a mild variety. Where it is considered that a fuller assessment is required children are referred to their own family doctors in order that they may arrange an appointment with a hospital consultant if it is thought necessary.

Under supervision, Ja	anuary	1956			106
Cases seen for the first	st time	in 195	6	*****	29
Cases who have re-at	tended	d in 19:	56	• • • • •	11
Discharged or ceased	atten	ding in	1956	•••••	22
Under supervision, D	Decemb	ber 195	6	*****	124
Total number of visit	is		*****	*****	174
Diagnosis in new cas	es:—				
Congenital abnorn	nality	•••••	*****		2
Functional tachyca	ırdia				3
Functional murmu	ır	*****	*****		21
Rheumatic pains	*****	*****	*****		1
Poor circulation	*****	*****	70000		2

## External Eye Disease and Defective Vision

Mr. J. Keyms, B.A., M.D., Ch.B., B.A.O., Ophthalmic Surgeon, conducts three sessions weekly at King's Park Road. The following table summarises the work carried out during the year, and shows comparative figures for the years 1954 and 1955:—

		1954	1955	1956
Attendances at Clinic	*****	5703	5586	5600
Individual children seen by the				
specialist		2920	2840	2665
Submitted to refraction		1488	1288	1455
Glasses prescribed	*****	1436	1228	1394
Received other treatment		26	43	33
Placed under observation	*****	1202	1194	1005
Found not to require treatment or				
observation	*****	241	333	302
Number of individual children for	who	m		
spectacles were:				
(a) Prescribed	*****	1436	1228	1386
(b) Obtained	*****	*1353	*1411	1141

<sup>\*</sup>This figure includes children for whom glasses were prescribed but not provided during the previous year.

The Local Health Authority pays a sessional fee to the Ophthal-mic Surgeon and claims on the Local Executive Committee for each case refracted.

# Ear, Nose and Throat Clinic

This clinic is conducted by Mr. Bernard Sugden, M.B., B.S., M.R.C.S., L.R.C.P., D.L.O., Aural Surgeon, whose services are provided by the Southampton Hospital Management Committee.

	1954	1955	1956
Total attendances	2250	2199	2059
New cases for consultation	909	816	734
Return cases for review or treatment	1341	1383	1325
Tonsil and adenoid operations	327	225	230
Nasal and aural operations	21	21	16
Audiographs		22	162

This clinic provides all the facilities of an Ear, Nose and Throat Department of a general hospital, offered in more congenial surroundings and supported by trained staff and complete ancillary services of speech therapy, lip-reading tuition and audiometry. Admission to hospital after consultation has throughout the year varied from two to six weeks.

## Orthopaedic Clinic

Most of the cases attending this clinic are those suffering from postural or foot defects. All cases requiring hospital admission, specialised treatment, etc., are referred to the Lord Mayor Treloar Orthopaedic clinic, which functions at the Royal South Hants Hospital, with whom the closest liaison is maintained. The family doctor is informed whenever a case is so referred, to enable him to make the necessary arrangements if so desired.

As in previous years, some cases were referred to this clinic by the family doctors.

Anterior poliomyel	itis	*****	1	Osgood-Schlatter's disease 1
Calcaneus valgus		****	11	Osteo chondritis 22
Cavo varus	•••••	*****	2	Other foot deformities 5
Claw Toes			13	Pes cavus 23
Depressed sternum	*****		3	Pes equino cavus 1
Dislocation of hip	*****	•••••	1	Pes plano valgus 47
Exostosis oscalcis	*****	*****	4	Pes valgus 335
Foot eversions	*****	*****	71	Pes varus 1
Ganglion	*****		3	Pigeon chest 4
Genu valgum			224	Poor posture 32
Genu varum	*****	*****	106	Scoliosis 66
Hallux valgus	*****		31	Short leg 41
Hammer toes	*****	*****	9	Spina bifida 1
Harrison's sulcus		*****	2	Sprains 10
Kypholordosis		*****	55	Talipes equino varus 5
Kyphosis	****	*****	41	Tight pectorals 10
Lordosis	****	*****	5	Tight tendo achilles 6
Metatarsus primus	elevat	us	2	Torticollis 8
Metatarsus varus	*****		26	Other Forms 241

1469

Classification		Under Sc	hool Age	Schoo	ol Age	Tot	al
		New	Old	New	Old	New	Old
Feet, etc Spine	*****	162 10	128 6	889 227	304 81	1051 237	432 87
TOTAL		172	134	1116	385	1288	519

# Speech Clinic

This clinic continued throughout the year. One session per week is held at each of the Oatlands House and Sydney House clinics.

The session held at Netley Court Special Day School was discontinued in June owing to considerable improvement in the condition of children treated there. In September the speech therapist commenced three half sessions at the Spastic Unit, Aster House.

Sessions conducted by	Speech 7	Therapi	st	*****	484
Attendances at clinic	•••••	*****		*****	2293
Treatments given	•••••	*****	*****	*****	2157
Consultations	*****	*****	*****	*****	39
Check examinations	*****	*****	*****		67
Cases discharged	*****	*****	*****		98
Children on register, D	<b>December</b>	1956	*****	*****	67

# Children on waiting list:

(a) for first consultation	*****	*****	137	
(b) for check examination		*****	43	
				180

The children discharged were classified as follows:--

	Normal Speech	nal	Improved	ved	Unco- operation	-c ion	No treatment necessary	'	Unsuitable for treatment	able	Left	ct	Left		Transferred To another clinic	rred other c	Total	, L
	Boys	Girls	Boys Girls	Girls	Boys	Girls	Boys	Girls	Boys	Girls ]	Boys	Girls	Boys (	Girls	Boys (	Girls 1	30ys	Girls
Stammering	5	3			13	2	1		ŧ	•	•	•	2	4	1	.	21	6
Dyslalia	10	$\infty$	-	-	26	∞	_	0		_	-	_			2		42	19
Dyslalia due to mental retardation		_		-	•	1	1	1				1	-	4		1	2	8
Dysphonia			-		1	•	1	•	0		•	•					2	
Totals	15 12	12	2	2	40	10	2		-	2	-	_	4	4	2		29	31

# Child Guidance Clinic

111 a	Il 2,157 child attend	ances	were m	ade, co	nsisti	ng of	:
	Consultations	****	****	*****		198	
	Treatments			•••••		1,096	
	Intelligence tests					-	
	Educational tests			*****		166	
	Remedial Teaching					604	
The	re were 1,448 parent	atten	dances,	and 33	1 hor	ne vi	sits were
made by	the Psychiatric Soci	al Wo	rkers.				
Sources	of referral:—						
	Doctors from vario	us clin	ics	*****	*****	55	
	Hospitals	*****	*****	*****	*****	48	
	Private doctors	*****	•••••	*****	•••••	19	
	Health visitors	*****	*****	*****	*****	5	
	Head teachers	•••••	•••••	••••	*****	45	
	Chief Education Of	ficer	•••••	*****	•••••	8	
	Probation Officers a	ind Ch	nief Cor	istable		24	
	Children's Officer	•••••	••••	*****	*****	14	
	Parents		*****	*****	*****	31	
	Speech Therapist	•••••	•••••	*****	•••••	1	
	Youth Employment	t Office	er	*****	•••••	6	
		0 11				256	
Reasons	for referral were as	LOHOW	~ A				
			S:		-		
	Nervous disorders-					2.4	
	Nervous disorders— Fears, anxieties and	nervo	ousness		•••••	34	TC 4 1 41
(a)	Nervous disorders— Fears, anxieties and Night terrors	nervo	usness	•••••			Total 41
	Nervous disorders— Fears, anxieties and Night terrors Habit disorders and	nervo	usness	•••••	 	7	Total 41
(a)	Nervous disorders— Fears, anxieties and Night terrors Habit disorders and Enuresis	nervo	usness	•••••	 	7 · 15	Total 41
(a)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties	nervo  I physi 	ousness  cal sym 	 ptoms-		7 15 3	Total 41
(a)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exceptions	nervo  l physi 	ousness  cal sym 	nptoms- 	*****	7 15 3 6	Total 41
(a)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exertic	nervo  l physi 	ousness  cal sym 	nptoms- 	*****	7 15 3	Total 41
(a)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exertic Tic Feeding difficulties	nervo  l physi 	ousness  cal sym	 nptoms-  	•••••	7 15 3 6	Total 41
(a)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exertic Tic Feeding difficulties Hysteria	nervo	ousness cal sym	 nptoms-  	•••••	7 15 3 6	Total 41
(a)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exertic Feeding difficulties Hysteria Asthma	nervo	ousness cal sym	 nptoms-  		7 15 3 6 2 1 1 1 1	
(a) (b)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exertic Tic Feeding difficulties Hysteria Asthma Double incontinence	nervo	cal symitty	 nptoms-  		7 15 3 6 2 1 1 1 1	Total 41 Total 35
(a)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exe Tic Feeding difficulties Hysteria Asthma Double incontinence Behaviour disorder	nervo	ousness cal sym	nptoms-		7 15 3 6 2 1 1 1 6	
(a) (b)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exertic Feeding difficulties Hysteria Asthma Double incontinence Behaviour disorders Unmanageable	nervo	cal symitty	nptoms-		7 15 3 6 2 1 1 1 6 17	
(a) (b)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exertic Tic Feeding difficulties Hysteria Asthma Double incontinence Behaviour disorder Unmanageable Pilfering	nervo	ousness cal sym	nptoms-		7 15 3 6 2 1 1 1 6 17 24	
(a) (b)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exe Tic Feeding difficulties Hysteria Asthma Double incontinenc Behaviour disorder Unmanageable Pilfering Tempers	nervo	ousness cal sym	nptoms-		7 15 3 6 2 1 1 1 6 6 17 24 5	
(a) (b)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exertic Feeding difficulties Hysteria Asthma Double incontinence Behaviour disorder Unmanageable Pilfering Tempers Withdrawn behaviour	nervo	ousness cal sym	nptoms-		7 15 3 6 2 1 1 1 6 17 24 5 6	
(a) (b)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exertic Tic Feeding difficulties Hysteria Asthma Double incontinence Behaviour disorders Unmanageable Pilfering Tempers Withdrawn behaviour Truanting	nervo	ousness cal sym	nptoms-		7 15 3 6 2 1 1 1 6 17 24 5 6 5	
(a) (b)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exertic Tic Feeding difficulties Hysteria Asthma Double incontinence Behaviour disorders Unmanageable Pilfering Tempers Withdrawn behaviour Truanting Aggressiveness and	nervo	ity	nptoms-		7 15 3 6 2 1 1 1 6 17 24 5 6	
(a) (b)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exertic Tic Feeding difficulties Hysteria Asthma Double incontinence Behaviour disorder Unmanageable Pilfering Tempers Withdrawn behaviour Truanting Aggressiveness and Sex problem	nervo	ousness cal sym	nptoms-		7 15 3 6 2 1 1 1 6 17 24 5 6 5	
(a) (b)	Nervous disorders—Fears, anxieties and Night terrors Habit disorders and Enuresis Speech difficulties Restlessness and exertic Tic Feeding difficulties Hysteria Asthma Double incontinence Behaviour disorders Unmanageable Pilfering Tempers Withdrawn behaviour Truanting Aggressiveness and	nervo	ity	nptoms-		7 15 3 6 2 1 1 1 6 17 24 5 6 5 5 1 2	

(d)	Educational difficulties—		
	Backward at school		31
	Inability to concentrate		4
	Educational and vocational guidance		9 Total 44
(e)	Special examinations—		
(0)	Intelligence test only		41
	Reports for children on remand	• • • • •	22.
	A.	*****	7 Total 70
	Advice regarding placement		/ Total /U

# Ages of referral:

Ages	2 and under	3	4	5	6	7	8	9	10	11	12	13	14	15		Over 16	Total
Boys	3	6	6	13	13	13	19	20	18	11	14	6	13	8	4	2	169
Girls	3	3	2	7	5	7	8	7	10	9	7	11	1	5	2		87

# Staff:

Part-time Medical Director and Consultant Psychiatrist: Dr. Mary Capes.

Part-time Consultant Psychiatrist:

Dr. W. J. T. Kimber.

Full-time Psychiatric Social Workers:

Miss Marion Opie. Miss Ishbel Beatty.

Full-time Educational Psychologist:

P. Williams, Esq., M.A., B.Sc.

Full-time Therapist and Psychologist: Mrs. E. Ellingham.

## ANALYSIS OF CLOSED CASES

## After Treatment:—

Much improved	*****	*****	*****	*****	19	
Improved	*****	*****			65	
Unchanged		*****	* * * * *	*****	2	
Transferred to other	er agen	cies	****	*****	17	
Closed prematurel	v :					•
Some improvemen			****	*****	13	
Unco-operative	*****	*****		*****	4	
Moved		*****	****		1 Total	121

## After investigation :—

Consultation and advice	*****	*****	*****	92	
Intelligence tests only		*****		45	
Transferred to other agence	cies	*****	*****	23	
Closed prematurely:—					
Some improvement	•••••	*****		11	
Unco-operative		*****	*****	11	
Treatment not feasible	*****	*****	*****	10 Total 19	92

#### Uneventuated:-

Improved before attendance	*****	*****	28	
Unsuitable for Child Guidance	*****	****	18	
Moved from district	*****	*****	5	
Dealt with by other means		*****	16 Total	67

Of the 450 children seen during the year, 14 were considered to need placement in boarding schools for maladjusted children.

General Comment on the work in the Clinic.—The work this year has continued much as before, with the majority of the referrals coming from medical sources, but a slowly increasing number coming directly from parents themselves. The pressure of work and the lengthy waiting lists still remain, consequently the decision of the Regional Hospital Board to appoint another consultant psychiatrist depending on the appointment of a second educational psychologist and a third psychiatric social worker by the local authority opens up an encouraging prospect of serving the community much more effectively and expeditiously. The team will then compare favourably in size with those of neighbouring clinics, and with that recommended in the Underwood Report for a child population of 47,900. A closer link has been developing this year with the Children's Department through monthly conferences, and with other social agencies through fortnightly meetings of the Social Rehabilitation This has prevented overlapping work and led to much greater co-ordination of services.

Training.—Two students studying social science at Southampton University concluded part of their training by working at the Clinic, as did a student of Educational Psychology from Birmingham University. A number of people from overseas also visited the clinic.

# Lectures Outside the Clinic. —

6 given to the students of the Social Science Course

5 at the Institute of Education

11 to the Workers Education Association

6 to Parent-Teacher and Young Wives Groups

## Work in the Schools.—

Individual intelligence tests	•••••		172
Educational tests	•••••		206
Discussions with teachers		*****	206

This has continued as in previous years. Many children are seen at the request of schools, and their difficulties talked over with the Head of the school, and in most cases with the class teacher as well. Links have been established with the remedial teachers working in some junior schools.

To some extent the emphasis has been changing toward a more comprehensive use of psychological tools and techniques within the schools themselves, rather than dependence on an individual psychologist for an examination of a single child, though this is, of course, essential in many cases. The programme of educational guidance, which was carried out in 1955-56 was a step in this direction and a report on this is given below.

## REPORT ON THE EDUCATIONAL GUIDANCE PROGRAMME:

## Introduction :-

During 1956 a programme of educational guidance in the second year of the junior schools was completed. The aims of this were two-fold, first to discover any intellectually limited children, who were in need of the extra help offered by special education (referred to below as the handicapped children) and secondly to assess how many children were making slow progress with the basic subjects of a sort which would be alleviated by remedial teaching (these children are referred to below as the retarded children).

The information about ability and aptitude given by this programme would also be of general use in aiding the educational progress of all the children.

#### Procedure:—

In the Autumn Term, 1955, schools took in the second junior year Primary School Verbal Intelligence Test 1. In addition, in order to examine more closely the cases of the weakest children, all those who obtained an intelligence quotient of 75 or less on this test took a non-verbal test, the Moray House Picture Intelligence Test. It was expected that the run of scores in the second test

would be slightly higher than the first, for statistical reasons, inter alia, but the two types of children mentioned above would appear in the following ways.

Those who were limited intellectually, referred to from now on as the "handicapped" would be considered as those children who scored less than 75 on both tests. All these children were seen individually for a psychological examination, their cases discussed with the headteacher concerned, and a brief report sent to the school.

Those who were able, but failing in reading, referred to from now on as the retarded, would score less than 75 on the first test but more than 90 on the second, non-verbal test. The low score on the first test would be due to a lack of the necessary reading proficiency to understand the questions. Unlike the second test, the directions of the verbal test are in print, and a weak reader almost inevitably scores poorly in spite of any general intellectual ability he may possess. There proved to be too many children in this group to be seen individually, but a reasonably random sample was obtained by testing the first child in alphabetical order in 20 schools where children of this group occurred.

It was not possible to calculate statistical data such as means and standard deviations for the verbal test, but the median intelligence quotient for 1,888 boys was 101, and for 1,983 girls 103. The spread of the boys' scores was wider than that of the girls. This sort of difference of spread is usually found when boys and girls are compared in this way.

# The Handicapped:—

Each of the 33 children in this group was seen individually, and given a Terman-Merrill Test and the 1947 Children's Matrices. These are intelligence tests which are given to a child in the presence of a psychologist alone, and not in a group of other children, and so present much better opportunities of ensuring that a child can do his or her best. Each of these children was also given two reading tests, the Schonell Word Recognition test, and the Holborn Reading Scale.

In addition, since all tests are occasionally unreliable to a slight extent, each Head was asked to name any other children who, in his opinion, should also be seen individually. Three more were nominated in this way, and 36 children were seen in all, 21 boys and 15 girls.

Several of these children were complete non-readers, or had made only the slightest start, and all 36 needed special help of some sort, mainly through the provision of special classes, or alteration in the school arrangements for them, but 8 were sufficiently handicapped to appear to need the extra help of the special school. There were in addition 6 children of this age group already placed in a special school, thus making 14 children in need of special school education out of the year group as a whole. This figure should be regarded as minimal, since in a year or two some of these children who are just succeeding in holding their own in ordinary schools at present will prove unable to maintain this, as the gap between them and their fellow pupils widens as they grow older.

It is interesting to compare these figures with the estimate of 1% of the school population needing a day special school given in the Ministry pamphlet on Special Educational Treatment. This estimate would suggest that about 39 children from the age group of approximately 3,900 children would need a day special school. In this particular age group the number of Southampton children needing this sort of education would appear to be slightly less than the national average.

Apart from this group of 8, the majority of the remainder of the 33 proved to be very weak intellectually, but able to hold their own at present in an ordinary school, given small group work with children of approximately their own intellectual level.

# The Retarded:-

It is generally agreed that most of us are either innately more able on the verbal side—the handling of language, comprehension, for example, or on the non-verbal side, involving practical tasks, grasping spatial relationships, etc. But a child who for a reason such as absence from school has made a slow start with reading will clearly fail a verbal test on this account, quite apart from the possible presence of a verbal weakness. From examination of the reading ages of the children who did badly in the verbal test, it seems that a reading age of at least 7½ years is necessary before a valid score is obtained.

Of the 20 children seen in this group, the spread of ability was in the average range, and some children who were superior intellectually had made a very poor start with reading.

An estimate of the backwardness present was made by calculating the difference between the child's reading age, and his own age. All the 20 children were backward to a greater or lesser extent, and the mean backwardness was 2.4 years. In other words half this

group of children read at a level below that reached by children nearly  $2\frac{1}{2}$  years younger. The backwardness varied from 1.8 years to 3.6 years.

There was no reason why this sample of 20 children should not be representative of the Borough as a whole. There would seem to be about 120 children who were seriously retarded in reading in this age group and who needed help.

While any attempt at comprehensive diagnosis of the backwardness shown would involve much more time than was available, nevertheless three factors stood out. At least half were children who had either suffered a break in normal family life, or had experienced prolonged illness, or who had a speech difficulty. In some cases a combination of these factors was present. It must not be assumed that these were causal factors, and equally some poor readers seemed well adjusted with a normal family background, but they are stresses on the children which may well have been reflected in their school work.

#### Comments:—

This survey of a complete age group has given an idea of the number of children in the Borough who are in need of special education on the grounds of limited ability. Many of these children have now been ascertained as handicapped pupils, and appropriate recommendations made.

The problems of retarded children have also been touched upon. The remedial teachers now working in some junior schools will help many of these and other children to make the most of their talents. Some of the children need assistance from other directions, such as the speech clinic and the child guidance clinic, and this has been forthcoming.

Little has been said about links with parents. It was impossible to see the parents of all the children, but whenever a point arose which had a direct bearing on a child's educational future, then a meeting was arranged with one or both of the parents to discuss the situation.

Finally it was only possible to carry out a survey of this sort with the help and co-operation of many people, particularly the Education Office, the Heads of the Primary Schools, and Miss Chen an educational psychologist from Birmingham University, who helped with the testing. There is every reason to believe that an early recognition and appreciation of the difficulties from which these children suffer will do much to reduce their problems, and will have made the effort involved worth while.

Dental Clinic, Cardigan Road.—Mr. A. Topping, the Principal School Dental Officer submits the following report:—

The school dental service continues to be hampered by the persistent lack of sufficient suitably qualified men to operate a full service, and although continuous efforts have been made throughout the year, no applicants have been found for the vacant posts. We have, however, been able to refill the vacancies for part time officers as these have arisen, and although this produces a lack of continuity, our staff in terms of man hours has remained stationary throughout the year, and from this point of view we have suffered no actual loss.

By re-arranging the existing staff, we were able to re-open the Sydney House Clinic in the month of October on a full time basis, and this will undoubtedly be of great convenience to the parents and children resident in the outlying eastern parts of the town, who often found it difficult to make the journey to the central clinic.

The Cardigan Road clinic has remained open full time, and it is at this clinic that the part time officers have given their services. Fortunately there are three dental chairs available at this clinic and we have been able in all cases to arrange facilities so as to allow for the outside commitments of these dental surgeons. In this way we have taken full advantage of all the help offered, even though this help has, in some cases, been of a very temporary nature.

The other clinic at Oatlands House has also remained open full time throughout the year, and has continued to provide Xray diagnosis for its own patients and those attending the other two clinics.

My general impression of the year is that in spite of many small difficulties and changes in personnel, we have, thanks to the good will of all concerned, been able to maintain this service at a more or less constant level.

Ultra Violet Light Clinics.—There are now seven centres where artificial sunlight treatment is available—King's Park Road, Sydney House, Oatlands House, Swaythling, Bitterne Park, Surrey House and Millbrook.

Satisfactory results have been obtained from this treatment. The Southampton Chest Clinic and general practitioners continue to refer a number of children for courses of ultra violet light.

ATTENDANCES AT ARTIFICIAL SUNLIGHT CLINIC

	otal		8	2
ook	л. То		23	215
Millbrook Clinic	Pre- Sch. Sch. Total			6
X			22	206
	Total		47	373
Surrey House Clinic	Pre- sch.		2	34
Su	Pre- Sch. Sch. Total		42	339
<b>d</b> )	Pre- Sch. Sch. Total		25	242
Bitterne Park Clinic	Pre- sch.		-	7
Bi 1	Sch. S		24	240
8.	Fotal		36	318
ythlin linic	Pre-		-	-
Swaythling Clinic	Pre- Sch. Sch. Total		35	317
S	Pre- Sch. Sch. Total		89	647
Oatlands House Clinic	Pre- Sch.		21	206
O	Sch.		47	441 206 647
	Fotal		63	385
Sydney House Clinic	Pre- Sch.		7	59
S	Pre- Sch. Sch. Total		99	326
ark	Pre- Sch. Sch. Total		12	96
King's Park Road Clinic	Pre- Sch.		7	16
Kin	Sch. S		10	80
		Children who attended for the first time	in 1956 Attendances	in 1956

School Clinics.—A new clinic was opened on the 2nd May, 1956, in the Millbrook area, thus making six clinics (listed below) serving the suburbs of Southampton. These clinics are in addition to the main Health Centre at King's Park Road and the main dental clinic at Cardigan Road. A Medical Officer conducts clinics at each of these centres.

Sydney House Clinic,
Pear Tree Avenue.
Oatlands House Clinic,
Winchester Road.
Swaythling Clinic,
Mayfield Road.
Bitterne Park Clinic,
Thorold Road.
Surrey House Clinic,
Sullivan Road.
Millbrook Clinic,
Cumbrian Way.

The number of attendances at the various clinics shows a very, slight decrease. The decrease in attendance at Oatlands House Clinic is due to the opening of the Millbrook Clinic.

Verrucae and warts appear to have been prevalent this year but these have responded well to treatment especially with the carbon dioxide snow treatment. There was an outbreak of verrucae in the Millbrook area during the summer and autumn but there was a striking fall in the winter months. Chlorosal treatment was recommended by the medical officer concerned. Nearly every child so afflicted had been attending the public swimming baths.

Urticaria was one of the most common amongst skin conditions encountered at Swaythling and Oatlands House Clinics.

In the Sydney House area there was an outbreak of impetigo contagiosa which was more infectious and much more resistant to treatment than had been common in the past few years. This often necessitated exclusion from school, a step which had not been necessary for this condition for some years.

Courses of sunlight at the various clinics appear to be popular and proved their tonic value.

Immunisation against Diphtheria.—A publicity campaign to encourage parents to accept diphtheria immunisation was organised in September. The campaign consisted of the showing of slides at a number of cinemas, press advertisements, and the display of posters in the buses. This was, of course, in addition to the usual propaganda which is carried out week by week, i.e. posting of birthday cards to children when they are one year of age and forwarding consent forms to all parents of children attaining the age of five years and entering infants' schools. School medical officers and health visitors continue to advise parents attending the clinics to avail themselves of this treatment for their children.

No doubt, due to the continual propaganda which is carried out year by year, there was no great increase as a result of the

campaign.

The number of children immunised during the year shows an increase, 3942 in 1956, as compared with 3644 in 1955. Of the children immunised during 1956, 2196 were dealt with at the clinics. The remaining 1746 being treated by general practitioners.

TABLE A

The following table gives details of the treatment und	ertaken
during the year:—	
(i) New cases	1203
Protective Injections :—	
Purified Toxoid Alum Precipitated first injection	1203
" " " second "	1140
", ", ", re-inforcing ",	1056
	3399
(ii) Immunisation at Clinics :—	
Number of clinics held 386	(355)
Total number of attend-	
ances 3399	(3250)
Number of children who	
have completed course 1140	(1049)
Number of re-inforcing	
courses 1050	6 (1071)
Immunisation by Private Doctors :—	
Number of children who	
have completed course 1311	(1152)
Number of re-inforcing	

2451 1491 (2201) (1443) (Figures in brackets refer to the year 1955)

courses

435 (372)

#### TABLE B

(Ministry of Health Annual Return for the Year Ended 31st December, 1956).

## IMMUNISATION IN RELATION TO CHILD POPULATION

Number of Children who had completed a full course of Immunisation at any time up to 31st December, 1956.

Age at 31/12/56 i.e. born in year	Under 1 1956	1-4 1952-1955	5-9 1947-1951	10-14 1942-1946	Under 15 Total
Last complete course of injections (primary or booster) 1952-1956	120	6519	9367	3082	19088
1942-1951			4005	9473	13478
Estimated Mid-Year child population	3300	12000	32600		47900

Immunisation against Whooping Cough. — Facilities exist at all the clinics for parents who wish to take advantage of immunisation of children against whooping cough.

Vaccination against Poliomyelitis.—The scheme approved by the Ministry of Health offering vaccination against poliomyelitis was inaugurated early in the year. As a result of a publicity campaign the names of 9633 children were placed on the register. Of these children 955 were vaccinated (874 received two injections and 81 one injection only). In December a small batch of vaccine was received and 63 children who had been given the first injection earlier in the year were given the second dose. In addition a further 14 children were given a first injection.

#### HANDICAPPED PUPILS

#### **ASCERTAINMENT**

Children suspected to be suffering from physical or mental defects requiring special educational treatment are referred for examination by the Education Department, private practitioners, health visitors, parents and from school medical inspection.

During the year under review, the following examinations were made:—

Referred as physically defective children	167
Referred as educationally subnormal or	
maladjusted children	155
Total examinations	322

As a result of these examinations, the under-mentioned recommendations were made to the Education Committee:—

PHYSIC.	al Cases—							
•	Open-air school for delicate pupils							
	Epileptic colony							
	School for physical			pupils	2			
	Deaf school		1.1		2 3			
	Home tuition	******		••••	1			
	School for partially		*****	****	2			
			*****	4 4 4 4 4 4	1			
	Discharged		****	*****	14			
	Discharged	•••••	*****	* * * * *	14			
OTHER	CASES—							
	Incapable of receiv	ing educ	ation a	t school	16			
	Incapable of receiv				10			
	on the ground th	_						
	he/she should be		-					
	with other childr		u III ass	ociation	1			
			10022000		1			
	Required supervisi				1			
	Special school (D	ay) as	eaucati	onally	2.4			
	sub-normal				34			
	Special school (Box	arding) a	is educa	ationally				
	sub-normal	*****	****	*****	10			
	Special school as n	naladjust	ted	*****	15			
	Ordinary school as	_		sub-				
	normal	*****		*****	27			
	Deferred				26			
	Home Tuition	*****			2			
	Home I amon	*****	*****	*****	2			

#### HANDICAPPED PUPILS ON REGISTER Blind ..... 7 Partially Sighted ..... 15 Deaf ...... Partially Deaf ...... 17 35 Delicate 192 Delicate and Physically Handicapped 1 1 Educationally Sub-normal ..... 272 Educationally Sub-normal and Partially 1 Educationally Sub-normal and Delicate 11 Educationally Sub-normal, Delicate and Maladjusted 1 ..... 2 Educationally Sub-normal and Epileptic Educationally Sub-normal and Maladjusted 12 Educationally Sub-normal and Partially Sighted ..... ..... ..... 3 Educationally Sub-normal and Physically 3 Handicapped ...... ..... ..... Educationally Sub-normal and Speech Defect 3 ..... 7 Epileptic .... ••••• ..... Maladjusted ..... ..... 59 .... Maladjusted, Partially Sighted and Delicate 1 2 Maladjusted and Delicate Physically Handicapped 40 Total 685 \*\*\*\*\* Handicapped Pupils newly placed in Special Schools or Homes: 42 Physically Defective Educationally Sub-normal:— 6 Residential ..... 12 Day ..... Maladjusted 14 74 Total \*\*\*\*\* Handicapped Pupils in Special Schools or Homes, at 31st December, 1956. Blind and Partially Sighted..... 15 13 Deaf and Partially Deaf 20 Delicate Physically Handicapped 8 ..... ..... 7 Epileptic ••••• Maladjusted 38 Educationally Sub-normal: Residential ..... 30 89 Day ..... .....

## PHYSICAL TRAINING

Report of the Physical Training Organisers.—The remedial classes in the town, most of which are now taken by a special peripatetic Remedial Teacher, are continuing satisfactorily. The numbers in the classes are much lower, owing to the fact that fewer children are found to be suffering from postural defects. This is due, no doubt, to the fact that practically all schools in the town are equipped with some climbing and heaving apparatus and that work is done in bare feet, so that full opportunity is given for developing mobility of the spine, strengthening the shoulder girdle muscles and exercising fully the muscles of the feet and legs.

Within the next two years all schools will be *fully* equipped with the folding Cave Southampton Units of heights ranging between 9 ft. and 16 ft., with climbing ropes, horizontal ladders and small beams and poles, as the Ministry of Education has approved in principle, the purchase of this equipment for schools under Loan Sanction.

Freedom is given to all children to work at their own pace on climbing apparatus, so that every child has the opportunity to experiment and develop his physical and nervous system.

The universal changing for physical education lessons has a marked effect on the standard of work and on the general atmosphere of the lessons. In practically all schools the children completely change into special physical education clothing provided by the Authority. In a few schools children still provide their own physical education clothing, but these schools will in the near future be provided with special clothing.

School Remedial Exercise Classes.—The following table gives details of the work carried out during 1956:—

Name of Cent	re		No. of children for whom accommodation is available	Individual children dealt with during 1956	Total attendances made by chil- dren during 1956
Aldermoor			30	23	983
Bassett Green	*****		30	24	761
Beechwood	*****		25	13	565
Bitterne Park Junior	*****		25	7	293
*Bitterne Park Sec. M	od.		20	11	69
Deanery			25	19	219
Girls' Grammar	*****	******	30	7	163
King Edward vi		*****	25	14	438
Mount Pleasant	*****		25	18	289
Portswood	*****		25	15	339
Shirley	*****	*****	30	19	1001
Shirley Warren	•••••	•••••	25	27	613
St. Anne's	•••••	*****	25	1	4
Tanner's Brook			30	20	389
Taunton's			25	39	1028
Western	******		25	20	425
Totals			420	277	7579

# INFECTIOUS DISEASES

The following notifications were received from the head teachers during the year:—

School			t Diph- theria	Measles	Chicken Pox	Whoopir Cough	ng Mumps	Other Diseases
Aldermoor		4	<del></del>	51	30	14	11	3
Ascupart				12	6	12	24	14
Banister		1		6	3	8	28	
Bassett Green		8		24	28	11	_	1
Beechwood		4		15	75			2
Bevois Town	•••••			9	19	3	11	2 2
Bitterne C. of E.	*****	1		130	2	9	2	18
Bitterne Manor		$\hat{2}$		6	ī	9		
Bitterne Park				84	90	26	9	8
Central				32	21	6	4	23
Deanery	*****		-				_	1
Foundry Lane	*****	2		69	15	31	4	
Freemantle	*****			23		4	$\frac{3}{2}$	
Girls' Grammar	*****					_		
Clanfold	*****	1		127	22	18	3	27
Horofold	*****			9	1	12	3	21
Heathfield	*****	4		111	38	26	41	4
11: ~L C ~1 J	•••••	4		6	30	20	41	4
Itchen Grammar	•••••	1		O				-
King Edward VI	*****	1		5	3			8
	*****	1	_	6	9	3	1	ō
Lordswood	*****		-	111	14			
Ludlow Road	*****	2 2				29	16	2 2
Mansel	*****	2	_	66	112	13	38	
Merry Oak	*****			5	1			12
Millbrook	•••••	1	_	16	1			4
Moorhill		1		16	2		1	~
Mount Pleasant	*****			12	7	8	11	7
Netley Court	*****		_		1.6			1.6
Newlands	*****	3	_	65	16	3	_	16
Northam	*****			23	14	3		-
Portswood	• • • • • •			5	6	11	1	5
Redbridge	*****	1	_	4	9	3		2
Regents Park	*****	10	_	39	27	12	1	
St. Anne's Gramm	mar		_		4.77	_	-	
St. Denys				12	47	9	36	6
St. John's	•••••		_	4	1	2	11	
St. Joseph's	•••••	_	_	_	_		11	
St. Jude's	••••	-		_				1
St. Mark's	••••			6		1	4	
St. Mary's	••••	_	_	12	2	4	32	
St. Monica		_	_	44	30	11	1	2
Secondary Techni	ical		_	1		_		
Shirley	•••••	7		29	12	22	22	1
Shirley Warren		6		29	7	10	11	1
Sholing(Middle R	(d.)			48	1	_	_	3
Springhill	******	—		8	3	2	13	5
Swaythling	*****		-	44	23	13	63	44
Tanner's Brook	*****	2	*	6	24	1		4
Taunton's		—	_			_		
Western		4	—	16	4	15	1	4
Weston Park		1	_	1	2	5	2	-
Wimpson		3	-	2	-	5	1	1
Woolston		2		59	61	31	5	2
Woolston R. C.		1		******	-	-	1	-
TOTALS		75	_	1292	789	405	422	236

Tuberculosis.—The following table shows the number of children notified under the Public Health (Tuberculosis) Regulations, 1952, giving the previous year's notifications in brackets.

Location of Disease	В	loys	(	Girls	То	tal
Pulmonary Tuberculosis Non-Pulmonary Tuberculosis	 9	(15) (5)	8 2	(23) (2)	17 2	(38) (7)
Totals	 9	(20)	10	(25)	19	(45)

Vaccination against Tuberculosis.—The B.C.G. vaccination of school children in the age group 13 plus was not arranged during the first half of the year owing to the scheme of poliomyelitis vaccination being in progress. However, children attending secondary modern schools with the exception of Woolston, Swaythling and Western schools, received vaccination. It is hoped to visit these three schools early in the new year. Children attending the grammar schools together with Woolston R.C., Springhill and St. Josephs, also received vaccination. Children attending the following private schools were also vaccinated:—

Atherley Girls' School
Clark's College
Clough's College
Oakmount School
St. Winifreds School
Woolston Vicarage School

The following table shows the results of the tests carried out.

Mantoux Tested	Not Read	Positive Reaction	Negative Reaction and Vaccinated
1776	27	344 (19.4 %)	1405 (79.1 %)

Children excluded from School.—The following are particulars of the defects for which children were excluded from school:—

Adenoid opera	ation	*****	*****	*****	20
Bronchitis	*****	*****	****	••••	3
Conjunctivitis	*****	••••	****	*****	5
Ear trouble	•••••	••••		*****	8
Impetigo		*****	*****	*****	53
Miscellaneous	** * * * *	*****		•••••	45
Ringworm	****	•••••	****	49****	3
Scabies	•••••	*****	0 * 0 * 0	*****	2
Sores	*****	*****	*****	00000	2
Tonsil and Add	enoid (	operation	ons	****	156
Tonsil operation	ons	••••	*****		15
Tonsillitis	*****	*****	•••••	*****	6
Urticaria	*****	*****	•••••	*****	1
Other E.N.T.	defects	*****	*****	****	3
Т	otal				322
10	otai	4 * 9 * * 9		*****	322

School Meals Service.— The total number of meals served during the year was 2,083,664 including those served at the four grammar schools, viz., Taunton's, King Edward VI, Itchen and Girls' Grammar Schools.

For the 3rd October when figures were supplied to the Ministry of Education for school meal statistics there were 10,377 children taking meals. The percentage of free meals was 7.64. The number of children taking meals was drawn from the following:—

Aldermoor Junior & Infants	185	Shirley Junior & Infants		268
Ascupart Junior & Infants	87	Shirley Warren Secondary		362
Aster House	7	Shirley Warren Junior	*****	175
Banister		Shirley Warren Infants		80
Bassett Green Junior & Infants	216	Lordswood (Shirley Warren		
Beechwood	336	Infants Annexe)		56
Bevois Town	34	Sholing Secondary	•••••	271
Bitterne Manor	87	Sholing Junior & Infants	• • • • • • •	193
Bitterne Park Secondary	175	St. Denys Junior & Infants	*****	98
Bitterne Park Junior & Infants	126	St. John's		55
Bitterne C. E. Junior & Infants		St. Joseph's		68
Central Secondary Central Junior & Infants	. 90	St. Jude's	•••••	41
Central Junior & Infants	. 179	St. Jude's St. Mark's		103
Deanery	149	St. Mary's		21
Foundry Lane Junior & Infants	204	St. Monica		202
Freemantle	~ ~	Springhill		296
Glenfield		Swaythling Secondary Girls		
Harefield Infants	39	& Boys		195
Heathfield Junior & Infants		Swaythling Junior & Infants		72
Highfield		Tanners Brook Junior & Infants		216
	331	Western Secondary	*****	175
Mansel Junior & Infants	234	Western Infants	*****	
Merry Oak	281			177
Millbrook	187			190
Moorhill		Woolston Secondary Boys & Gir	ls	332
	. 105	Woolston R. C	•••••	122
Mount Pleasant Infants		Woolston Infants		108
Newlands Junior & Infants		Secondary Technical		114
Netley Court				471
Northam Junior & Infants				200
Portswood Secondary				456
Portswood Junior & Infants		Taunton's	• • • • • •	436
Redbridge	51			
	308			
Regents Park Infants	21			

Adexolin Capsules.—During the year, 1027 recommendations were made by school medical officers for the supply of adexolin capsules. The total number of children receiving capsules at the end of the year was 3296.

Milk.—During the year, 5,408,479 third pints of milk were consumed by the children in the schools, and were supplied free of charge.

# Medical Inspection Returns Year Ended 31st December, 1956 TABLE 1

# Medical Inspection of Pupils attending Maintained Primary and Secondary Schools

(Including Special Schools)

A—Periodic Medical Inspections

Age Groups inspected and number of children examined in each:

cucii.					
Entrants	*****	*****	*****	*****	2958
Juniors	••••	******	******	******	2935
	*****	*****	*****	*****	
Leavers		*****	*****		2696
	Total	*****	*****	*****	8589
Additiona	al Periodic	Inspect	tions *		1106
					. ,
	Grand	Total	•••••	*****	9695
	B—OTHER	INSPE	CTIONS		
Number of	of Special I	nspecti	ons		9709
		4	0 110	******	18310
Number	of Re-inspe	etions	*****	*****	10310
	Tatal				20010
	Total	*****	• • • • •		28019

## C—Pupils found to Require Treatment

Number of Individual Pupils found at Periodic Medical Inspection to Require treatment (excluding Dental Diseases and Infestation with Vermin)

	Age Gr	oup Ins	pected		For defective vision (excluding squint)	For any of the other conditions recorded in Table 3a	Total Individual Pupils
		(1)			(2)	(3)	(4)
Ent	rants	*****	*****	*****	79	559	603
Jun	iors	•••••	*****	*****	277	494	681
Lea	vers	*****	*****	*****	308	346	584
Tot	al	*****	*****	*****	664	1399	1868
Add	ditional l	Periodic	Insp'ns	*	128	190	285
	GRAND	TOTAL	*****	•••••	792	1589	2153

<sup>\*</sup> e.g., Pupils at special schools or who missed the usual periodic examination

# D—CLASSIFICATION OF THE PHYSICAL CONDITION OF PUPILS INSPECTED IN THE AGE GROUPS RECORDED IN TABLE 1 A.

Age Groups	Number of Pupils	Satisf	actory	Unsatisfactory		
Age Groups	In- spected	No.	% of col. 2	No.	% of col. 2	
(1) Entrants	(2) 2958	(3) 2758	(4) 93.24	(5) 200	(6) 6.76	
Juniors	2935	2813	95.85	122	4.15	
Leavers	2696	2670	99.03	26	0.97	
Add'al Periodic Inspections	1106	1075	97.2	31	2.8	
TOTAL	9695	9316	96.1	379	3.9	

### TABLE 2

#### INFESTATION WITH VERMIN

Notes.—The arrangements made for the examination and cleansing of infested pupils appear on page 11.

All cases of infestation, however slight, are recorded.

The return relates to individual pupils and not to instances of infestation.

(i)	Total number of examinations in the schools by the school nurses or other authorised persons	•••••	75297
(ii)	Total number of individual pupils found to be infested	•••••	607
(iii)	No. of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	••••	139
(iv)	No. of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	•••••	_

TABLE 3

# RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION

# A.—Periodic Inspections

		Pi	eriodic In	TOTAL				
De- fect	Defeat or Disease	Entrants		Leav	vers	(including all other age groups inspected)		
Code No.	Defect or Disease	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	
4 5	Skin	47	99	58	62	190	257	
	Eyes— a. Vision b. Squint c. Other	79 52 16	520 50 27	308 9 10	217 5 8	792 106 38	1191 81 51	
6	Ears— a. Hearing b. Otitis Media c. Other	35 21 13	93 47 109	$\frac{12}{9}$	9 1 9	79 37 33	149 74 179	
7 8 9	Nose & Throat Speech Lymphatic	149 20	801 281	23 10	136	241 55	1338 347	
10	Glands	34	411 53	1 18	18 79	58 70	572 207	
11 12	Development — a. Hernia	60	177	44	61	163	343	
13	b. Other Orthopaedic—	25	140	5	9	93	319	
	a. Posture b. Feet c. Other	92	111 233 371	49 39 49	125 192 207	127 228 246	396 757 858	
14	Nervous system- a. Epilepsy b. Other	3 16	8 37	5	2 17	13 30	17 87	
15	Psychological— a. Development b. Stability		14 278	$\frac{}{2}$	4 13	9 88	40 416	
16 17	Abdomen Other	22	91	43	34 60	26	267	

40
B.—Special Inspections

Defect	Defeat an Diagon	Special In	spections
Code No.	Defect or Disease (2)	Requiring Treatment (3)	Requiring Observation (4)
			-
4 5	Skin Eyes—	. 779	6
	a. Vision		925
	b. Squint	.   127	105
6	c. Other Ears—	. 69	3
	a. Hearing	. 96	4
	b. Otitis Media	. 16	2
	c. Other	. 92	10
7	Nose and Throat	. 243	77
7 8 9	Speech	. 22	14
9	Lymphatic Glands	. 21	2
10	Heart	. 90	2 4
11 12	Lungs Development—	. 121	4
	a. Hernia	•	1
	b. Other	.   7	5
13	Orthopaedic—		
	a. Posture		13
	b. Feet	1	6
	c. Other	.   194	12
14	Nervous system—		
	a. Epilepsy	1	2
	b. Other	. 22	10
15	Psychological—		
	a. Development		5
	b. Stability	1	9
16	Abdomen		1
17	Other	. 1572	49

## TABLE 4

## TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND

## SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS)

Notes:—In Groups 1, 2 and 3 treatment includes all defects treated or under treatment during the year by the Authority's own staff, however brought to the Authority's notice, (i.e., whether by periodic inspection, special inspection, or otherwise during the year in question or previously) or provided otherwise than by the Authority (i.e. known by the Authority to have been provided, including treatment carried out in school clinics by the Regional Hospital Board).

# GROUP 1—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases to have been de				
	By the Authority Otherwi				
External and other, excluding errors of refraction and squint Errors of refraction (including squint)	58 1455	18 146			
Total	1513	164			
Number of pupils for whom spectacles were prescribed	1386	***************************************			

# GROUP 2-DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of case to have been t	
	By the Authority	Otherwise .
Received operative treatment  (a) for diseases of the ear  (b) for adenoids and chronic  tonsillitis  (c) for other nose and throat conditions  Received other forms of treatment	6 230 10 787	15 28 12 10
Total	1033	65
Total number of pupils in schools who are known to have been provided with hearing aids		
(a) in 1956 (b) in previous years	_	27

# GROUP 3—ORTHOPAEDIC AND POSTURAL DEFECTS

	By the Authority	Otherwise
Number of pupils known to have been treated at clinics or out-patients departments	1807	306
GROUP 4—DISEASES OF THE SKIN (excluding uncleanliness for which	see Table 2)	
,	Number of case or under treatment the year by the	ent during
Ringworm—	69 69 760	) ) )
GROUP 5—CHILD GUIDANCE TREATMENT	· ·	
Number of pupils treated at Child Guidance Clinic under arrangements made by the Authority  GROUP 6—SPEECH THERAPY	574	1*
Number of pupils treated by Speech Therapists under arrangements made by the Authority	147	7
GROUP 7—OTHER TREATMENT GIVEN		
<ul> <li>(a) Number of cases of miscellaneous minor ailments treated by the Authority</li> <li>(b) Pupils who received convalescent treatment under School Health</li> </ul>	1948	
Service arrangements (c) Pupils who received B. C. G. vaccination (d) Other than (a), (b) and (c) above	1369	
1. Rheumatism and Heart 2. Lungs 3. Nervous System 4. Cervical Glands	134 148 35 65	
Total (a)—(d)	3699	

<sup>\*</sup> This figure includes 124 children seen at school.

# TABLE 5

# DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

(1)	Number o	f pupils inspecte	ed by the	Auth	ority's l	<b>Dent</b> al	Office	rs :	
	(a) At Per	riodic Inspection	ıs	****	****	*****	*****		9820
	(b) As Sp		******	*****	****	*****	*****		3507
		T (1)							12227
		Total $(1)$	****	*****	*****		*****	*****	13327
(2)	Number fo	ound to require	treatmen	t		*****	*****	*****	11162
(3)		ffered treatment			•••••	*****	*****		9977
(4)		ctually treated	*****	*****	*****	*****	*****		5553
(5)		f attendances ma							
` /		those recorded a					*****	*****	10514
(6)	Half days	devoted to: Per	•	chool)	Inspect	ion	*****	*****	78
		Treatme	nt	*****	*****	•••••	*****	*****	1679
		Total (6)							1757
		101AL (0)	****	*****	••••	*****	*****	*****	1/3/
(7)	Fillings:	Permanent Tee	th	*****		****	*****		8490
\ /	S	Temporary Te		*****	*****	*****	*****		49
		- (E)							0.500
		Total $(7)$	•••••	• • • • • • • • • • • • • • • • • • • •	*****	*****	*****	*****	8539
(8)	Number of	f teeth filled:	Permane	nt Tee	th				7022
(0)	1 dilloct of		Tempora						47
			- <b>-</b>	-		*****	******	******	
		Total $(8)$	•••••	*****		*****	*****		7069
(0)	T 4 41.	D	TT						1067
(9)	Extraction	s: Permanent Temporary		*****	*****		*****	*****	1857 6107
		remporary	reem		*****	*****	*****	*****	0107
		TOTAL (9)	*****	****	*****	*****		*****	7964
		. ,							
(10)	Administr	ration of general	anaesth	etics fo	or <b>extr</b> a	ction	*****	*****	3436
(11)	Orthodon	itics:							
	(a) Case	es commenced d	uring the	e year	•••••	*****	* * * * * *	*****	12
		es carried forwar			us year	•••••	****		7
	` '	es completed du	-		*****	*****	*****	*****	14
	` '	es discontinued	_	-	•		*****	*****	
	` '	ils treated with a		es		*****	*****	*****	12
		ovable applianc		•••••	••••	*****	*****	*****	12
		d appliances fitt	ed	•••••	*****		*****	*****	400
	\ /	al attendances				••••	•••••	•••••	497
(12)		of pupils supplied	d with ai	rtificial	dentur	es	*****	****	102
(13)	Other ope								
		nanent teeth	*****	*****	*****	*****		*****	1335
	Tem	porary teeth	*****	*****	*****	*****	*****	*****	6
		TOTAL (13)						4	1341
		TOTAL (13)	*****	******	*****	*****	*****		1341

